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| PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)   |                                  | E Jacket No. (Optional)<br>273402004000 |        |                          |                               |    |  |                          |                                |    |  |                                     |                                  |    |        |                          |                                 |    |  |                          |                                 |    |  |
|--|----------------------------------|---|--------|--------------------------|-------------------------------|----|--|--------------------------|--------------------------------|----|--|-------------------------------------|----------------------------------|----|--------|--------------------------|---------------------------------|----|--|--------------------------|---------------------------------|----|--|
| In re Application of Jeffrey J. GORMAN   |                                  |   |        |                          |                               |    |  |                          |                                |    |  |                                     |                                  |    |        |                          |                                 |    |  |                          |                                 |    |  |
| Application Number<br>09/202,035   |                                  | Filed<br>December 16, 1998              |        |                          |                               |    |  |                          |                                |    |  |                                     |                                  |    |        |                          |                                 |    |  |                          |                                 |    |  |
| For: VIRAL PEPTIDES WITH STRUCTURAL HOMOLOGY TO<br>PROTEIN G OF RESPIRATORY SYNCYTIAL VIRUS  |                                  |   |        |                          |                               |    |  |                          |                                |    |  |                                     |                                  |    |        |                          |                                 |    |  |                          |                                 |    |  |
| Group Art Unit<br>1648   |                                  | Examiner<br>B. Li                       |        |                          |                               |    |  |                          |                                |    |  |                                     |                                  |    |        |                          |                                 |    |  |                          |                                 |    |  |
| <p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.</p> <p>The requested extension and appropriate non-small-entity fee are as follows (check time period desired):</p> <table><tbody><tr><td><input type="checkbox"/></td><td>One month (37 CFR 1.17(a)(1))</td><td>\$</td><td></td></tr><tr><td><input type="checkbox"/></td><td>Two months (37 CFR 1.17(a)(2))</td><td>\$</td><td></td></tr><tr><td><input checked="" type="checkbox"/></td><td>Three months (37 CFR 1.17(a)(3))</td><td>\$</td><td>930.00</td></tr><tr><td><input type="checkbox"/></td><td>Four months (37 CFR 1.17(a)(4))</td><td>\$</td><td></td></tr><tr><td><input type="checkbox"/></td><td>Five months (37 CFR 1.17(a)(5))</td><td>\$</td><td></td></tr></tbody></table> <p><input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ 465.00</p> <p><input type="checkbox"/> A check in the amount of the fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p><input checked="" type="checkbox"/> The Commissioner has already been authorized to charge fees in this application to a Deposit Account.</p> <p><input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 03-1952</p> <p><del>I have enclosed a duplicate copy of this sheet.</del> Fee Transmittal form (PTO/SB/17) is attached to this submission in duplicate.</p> <p>I am the <input type="checkbox"/> applicant/inventor.<br/><input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71.<br/>Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).<br/><input checked="" type="checkbox"/> attorney or agent of record.<br/><input type="checkbox"/> attorney or agent under 37 CFR 1.34(a).<br/>Registration number if acting under 37 CFR 1.34(a) _____</p> <p>July 14, 2003<br/>Date</p> <p><i>Jill A. Jacobson</i><br/>Signature<br/>Jill A. Jacobson<br/>Typed or Printed Name</p> <p>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below</p> <p><input checked="" type="checkbox"/> 1 forms are submitted.</p> |                                  |   |        | <input type="checkbox"/> | One month (37 CFR 1.17(a)(1)) | \$ |  | <input type="checkbox"/> | Two months (37 CFR 1.17(a)(2)) | \$ |  | <input checked="" type="checkbox"/> | Three months (37 CFR 1.17(a)(3)) | \$ | 930.00 | <input type="checkbox"/> | Four months (37 CFR 1.17(a)(4)) | \$ |  | <input type="checkbox"/> | Five months (37 CFR 1.17(a)(5)) | \$ |  |
| <input type="checkbox"/>   | One month (37 CFR 1.17(a)(1))    | \$                                      |        |                          |                               |    |  |                          |                                |    |  |                                     |                                  |    |        |                          |                                 |    |  |                          |                                 |    |  |
| <input type="checkbox"/>   | Two months (37 CFR 1.17(a)(2))   | \$                                      |        |                          |                               |    |  |                          |                                |    |  |                                     |                                  |    |        |                          |                                 |    |  |                          |                                 |    |  |
| <input checked="" type="checkbox"/>  | Three months (37 CFR 1.17(a)(3)) | \$                                      | 930.00 |                          |                               |    |  |                          |                                |    |  |                                     |                                  |    |        |                          |                                 |    |  |                          |                                 |    |  |
| <input type="checkbox"/>   | Four months (37 CFR 1.17(a)(4))  | \$                                      |        |                          |                               |    |  |                          |                                |    |  |                                     |                                  |    |        |                          |                                 |    |  |                          |                                 |    |  |
| <input type="checkbox"/>   | Five months (37 CFR 1.17(a)(5))  | \$                                      |        |                          |                               |    |  |                          |                                |    |  |                                     |                                  |    |        |                          |                                 |    |  |                          |                                 |    |  |

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PTO/SB/21 (08-00)

Approved for use through 10/31/2002. OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE


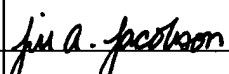
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|   |                             |                               |              |
|---|-----------------------------|-------------------------------|--------------|
| <b>TRANSMITTAL FORM</b><br><br>(to be used for all correspondence after initial filing) | <b>Application Number</b>   | 09/202,035                    |              |
|   | <b>Filing Date</b>          | December 16, 1998             |              |
|   | <b>First Named Inventor</b> | Jeffrey John GORMAN           |              |
|   | <b>Group Art Unit</b>       | 1648                          |              |
|   | <b>Examiner Name</b>        | B. Li                         |              |
| <b>Total Number of Pages in This Submission</b>   | 43                          | <b>Attorney Docket Number</b> | 273402004000 |

**ENCLOSURES (check all that apply)**

|   |   |   |
|---|---|---|
| <input checked="" type="checkbox"/> Fee Transmittal Form +duplicate copy for fee processing - 2 pages<br><input type="checkbox"/> Fee Attached<br><input checked="" type="checkbox"/> Amendment/Reply - 18 pages<br><input type="checkbox"/> After Final<br><input type="checkbox"/> Affidavits/declaration(s)<br><input checked="" type="checkbox"/> Extension of Time Request - 1 page<br><input type="checkbox"/> Express Abandonment Request<br><input type="checkbox"/> Information Disclosure Statement<br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><input type="checkbox"/> Response to Missing Parts/Incomplete Application<br><input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Assignment Papers (for an Application)<br><input type="checkbox"/> Drawing(s)<br><input type="checkbox"/> Licensing-related Papers<br><input type="checkbox"/> Petition<br><input type="checkbox"/> Petition to Convert to a Provisional Application<br><input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address<br><input type="checkbox"/> Terminal Disclaimer<br><input type="checkbox"/> Request for Refund<br><input type="checkbox"/> CD, Number of CD(s) _____ | <input type="checkbox"/> After Allowance Communication to Group<br><input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences<br><input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)<br><input type="checkbox"/> Proprietary Information<br><input type="checkbox"/> Status Letter<br><input checked="" type="checkbox"/> Other Enclosure(s) (please identify below)<br>1. Exhibits A, B + C (21 pages)<br>2. Return Postcard |
| <b>Remarks</b>  |   |   |

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

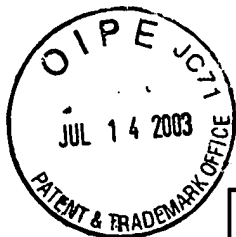
|                                |   |   |
|--------------------------------|---|---|
| <b>Firm or Individual Name</b> | MORRISON & FOERSTER LLP<br>Jill A. Jacobson - 40,030                                | <br>* 2 5 2 2 6 * |
| <b>Signature</b>               |  |   |
| <b>Date</b>                    | July 14, 2003   |   |

I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EV 333855059 US, in an envelope addressed to: Mail Stop Non-Fee Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: 7-14-03

Signature: 

(Anthony Soljanich)



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PTO/SB/17 (01-03)

Approved for use through 04/30/2003. OMB 0651-0032

TECH CENTER 1600/2900

| FEE TRANSMITTAL<br>for FY 2003<br><small>Patent fees are subject to annual revision.</small>  |  | Complete if Known  |                   |
|---|--|--|-------------------|
| <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27   |  | Application Number   | 09/202,035        |
| TOTAL AMOUNT OF PAYMENT (\$)  |  | Filing Date  | December 16, 1998 |
| 465.00  |  | First Named Inventor   | Jeffrey J. GORMAN |
|   |  | Examiner Name  | B. Li             |
|   |  | Group Art Unit   | 1648              |
|   |  | Attorney Docket No.  | 273402004000      |
| METHOD OF PAYMENT (check all that apply)  |  | FEE CALCULATION (continued)  |                   |
| <input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None |  | 3. ADDITIONAL FEES   |                   |
| <input checked="" type="checkbox"/> Deposit Account   |  | Large Entity Small Entity  |                   |
| Deposit Account Number 03-1952  |  | Fee Code Fee (\$)  |                   |
| Deposit Account Name Morrison & Foerster LLP  |  | Fee Description Fee Paid   |                   |
| The Commissioner is hereby authorized to: (check all that apply)  |  | 1051 130 2051 65 Surcharge - late filing fee or oath                                       |                   |
| <input checked="" type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments   |  | 1052 50 2052 25 Surcharge - late provisional filing fee or cover sheet.                    |                   |
| <input checked="" type="checkbox"/> Charge any additional fee(s) during the pendency of this application  |  | 1053 130 1053 130 Non-English specification  |                   |
| <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.  |  | 1812 2,520 1812 2,520 For filing a request for ex parte reexamination                      |                   |
| FEE CALCULATION   |  | 1804 920* 1804 920* Requesting publication of SIR prior to Examiner action                 |                   |
| 1. BASIC FILING FEE   |  | 1805 1,840* 1805 1,840* Requesting publication of SIR after Examiner action                |                   |
| Large Entity Small Entity   |  | 1251 110 2251 55 Extension for reply within first month                                    |                   |
| Fee Code Fee (\$)   |  | 1252 410 2252 205 Extension for reply within second month                                  |                   |
| 1001 750 2001 375 Utility filing fee  |  | 1253 930 2253 465 Extension for reply within third month                                   |                   |
| 1002 330 2002 165 Design filing fee   |  | 1254 1,450 2254 725 Extension for reply within fourth month                                |                   |
| 1003 520 2003 260 Plant filing fee  |  | 1255 1,970 2255 985 Extension for reply within fifth month                                 |                   |
| 1004 750 2004 375 Reissue filing fee  |  | 1401 320 2401 160 Notice of Appeal   |                   |
| 1005 160 2005 80 Provisional filing fee   |  | 1402 320 2402 160 Filing a brief in support of an appeal                                   |                   |
| SUBTOTAL (1) (\$)   |  | 1403 280 2403 140 Request for oral hearing   |                   |
| 0.00  |  | 1451 1,510 1451 1,510 Petition to institute a public use proceeding                        |                   |
| 2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE   |  | 1452 110 2452 55 Petition to revive - unavoidable  |                   |
| Total Claims 31 -31* = 0 x 9.00 = 0.00  |  | 1453 1,300 2453 650 Petition to revive - unintentional                                     |                   |
| Independent Claims 3 -3 = 0 x 42.00 = 0.00  |  | 1501 1,300 2501 650 Utility issue fee (or reissue)   |                   |
| Multiple Dependent 140.00 = 0.00  |  | 1502 470 2502 235 Design issue fee   |                   |
| Large Entity Small Entity   |  | 1503 630 2503 315 Plant issue fee  |                   |
| Fee Code Fee (\$)   |  | 1460 130 1460 130 Petitions to the Commissioner  |                   |
| 1202 18 2202 9 Claims in excess of 20   |  | 1807 50 1807 50 Processing fee under 37 CFR 1.17(q)  |                   |
| 1201 84 2201 42 Independent claims in excess of 3   |  | 1806 180 1806 180 Submission of Information Disclosure Stmt                                |                   |
| 1203 280 2203 140 Multiple dependent claim, if not paid   |  | 8021 40 8021 40 Recording each patent assignment per property (times number of properties) |                   |
| 1204 84 2204 42 ** Reissue independent claims over original patent  |  | 1809 750 2809 375 Filing a submission after final rejection (37 CFR 1.129(a))              |                   |
| 1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent   |  | 1810 750 2810 375 For each additional invention to be examined (37CFR 1.129(b))            |                   |
| SUBTOTAL (2) (\$)   |  | 1801 750 2801 375 Request for Continued Examination (RCE)                                  |                   |
| 0.00  |  | 1802 900 1802 900 Request for expedited examination of a design application                |                   |
| **or number previously paid, if greater; For Reissues, see above  |  | Other fee (specify)  |                   |
| SUBMITTED BY  |  | Complete (if applicable)   |                   |
| Name (Print/Type) Jill A. Jacobson  |  | Registration No. 40,030  |                   |
| Signature <i>Jill A. Jacobson</i>   |  | Telephone (650) 813-5876   |                   |
|   |  | Date July 14, 2003   |                   |

I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EV 333855059 US, in an envelope addressed to: Mail Stop Non-Fee Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: 7-14-03 Signature: *Anthony Soljanich* (Anthony Soljanich)